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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0851-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	Chao
Title	Hydroxy-Terminated Polybutadienes and Thiol-Terminated Polybutadienes
Group Art Unit	
Examiner Name	
Attorney Docket Number	128049

I hereby appoint:

☒ Practitioners at Customer Number 

OR

☐ Practitioner(s) named below:Place Customer
Number Bar Code
Label here

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

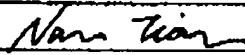
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Nan Tian

Signature



Date

July 26, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**POWER OF ATTORNEY OR
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Application Number	
Filing Date	
First Named Inventor	Chao
Title	Hydroxy-Terminated Polybutadienes and Their Use in Cores
Group Art Unit	
Examiner Name	
Attorney Docket Number	128049

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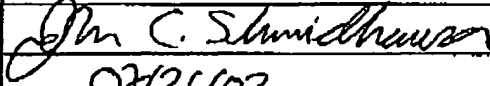
☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record

Name

John Schmidhauser

Signature



Date

07/26/02

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	Chao
Title	Hydroxly-Terminated Polybutadienes and Their Use in Composites
Group Art Unit	
Examiner Name	
Attorney Docket Number	128049

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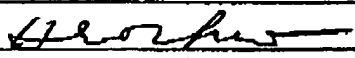
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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Herbert Chao
Signature	
Date	7/26/2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of _____ forms are submitted.

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**POWER OF ATTORNEY OR
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Application Number	
Filing Date	
First Named Inventor	Chao
Title	Hydroxly-Terminated Polybutadienes and
Group Art Unit	
Examiner Name	
Attorney Docket Number	128049

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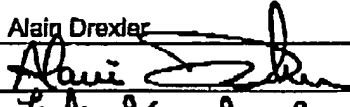
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Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record

Name	Alain Drexler
Signature	
Date	July 26, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ Total of _____ forms are submitted.

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PTO/SB/01 (10-01)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

128049

First Named Inventor

Chao

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HYDROXYLY-TERMINATED POLYBUTADIENES AND THEIR USE IN CURING
FORMULATIONS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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PTO/BB/01 (10-01)

Approved for use through 10/31/2002. OMB 0831-0032

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle (if any)) HerbertFamily Name
or Surname ChaoInventor's
Signature

Date

Residence: City Paoli

State PA

Country

Citizenship USA

Mailing Address 1957 Glenwold Drive

City Paoli

State PA

ZIP 19301

Country USA

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle (if any)) NanFamily Name
or Surname TianInventor's
Signature

Date

7/26/2002

Residence: City Wilmington

State DE

USA

Country

Peoples Rep. China
Citizenship

Mailing Address 121 Median Drive

City Wilmington

State DE

ZIP 19803

Country USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

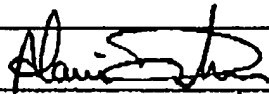
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PTO/SB/02A (3-97)

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Alain				Drexler			
Inventor's Signature						Date	7/26/02
Residence: City	Philadelphia	State	PA	Country	USA	Citizenship	USA
Post Office Address 1906 Pine Street, Apartment 3F							
Post Office Address							
City	Philadelphia	State	PA	ZIP	10103	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
John				Schmidhauser			
Inventor's Signature						Date	
Residence: City	Paoli	State	PA	Country	USA	Citizenship	USA
Post Office Address 74 Jolind Road							
Post Office Address							
City	Paoli	State	PA	ZIP	19301	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Herbert

Family Name

or Surname

Chao

Inventor's
Signature

Date

7/26/2002

Residence: City Paoli

State PA

Country

Citizenship USA

Mailing Address 1957 Glenwold Drive

City Paoli

State PA

ZIP 19301

Country USA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Nan

Family Name

or Surname

Tian

Inventor's
Signature

Date

Residence: City Wilmington

State DE

Peoples Rep. China

Country

Peoples Rep. China

Citizenship

Mailing Address 121 Median Drive

City Wilmington

State DE

ZIP 19803

Country USA

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Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (3-87)

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Alain				Drexler			
Inventor's Signature						Date	
Residence: City		Philadelphia	State	PA	Country	USA	Citizenship
Post Office Address		1906 Pine Street, Apartment 3F					
Post Office Address							
City		Philadelphia	State	PA	ZIP	10103	Country
Country		USA					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
John				Schmidhauser			
Inventor's Signature		<i>John C Schmidhauser</i>				Date	
Residence: City		Paoli	State	PA	Country	USA	Citizenship
Post Office Address		74 Jolind Road					
Post Office Address							
City		Paoli	State	PA	ZIP	19301	Country
Country		USA					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City			State		Country		Citizenship
Post Office Address							
Post Office Address							
City			State		ZIP		Country
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